

United States District Court
Southern District of Texas
FILED

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF TEXAS
McALLEN DIVISION

NOV 07 2018

David J. Bradley, Clerk

UNITED STATES OF AMERICA

v.

ANGEL LUIS CLAUDIO

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M-18-1878

CRIMINAL INFORMATION

THE UNITED STATES ATTORNEY CHARGES:

At all times material to this Information:

1. A “health care benefit program” under Section 24(b) of Title 18, United States Code, was defined as “any public or private plan or contract, affecting commerce, under which any medical benefit, item, or service is provided to any individual, and includes any individual or entity who is providing a medical benefit, item, or service for which payment may be made under the plan or contract.”

2. The Medicare Program (“Medicare”) was a federal health care program providing benefits to individuals who were over the age of 65 or disabled. Medicare was administered by the Centers for Medicare and Medicaid Services, a federal agency under the United States Department of Health and Human Services (“HHS”).

3. The Texas Medical Assistance Program, also known as the Texas Medicaid Program (“Medicaid”), was a federal and state health care benefit program. The Health and Human Services Commission, a Texas governmental agency, and HHS administered the Texas Medicaid Program.

4. Medicare and Medicaid were health care benefit programs as defined by Title 18,

United States Code, Section 24(b).

5. Individuals who qualify for Medicare and Medicaid benefits were commonly referred to as “beneficiaries.”

THE DEFENDANT

6. Defendant ANGEL LUIS CLAUDIO was a resident of Hidalgo County, Texas, and was a physician licensed to practice in the State of Texas.

7. Beginning in or around February 2016, and continuing to the present, ANGEL LUIS CLAUDIO was under court order prohibiting him from engaging in employment that involved the billing of Medicare and Medicaid, including employment at a medical practice that treats Medicare and Medicaid beneficiaries.

COUNT ONE
CONSPIRACY TO COMMIT HEALTH CARE FRAUD
(18 U.S.C. § 1349)

8. Beginning in or about January 2017 and continuing through in or about March 2018, in the McAllen Division of the Southern District of Texas, and elsewhere within the jurisdiction of the Court, the exact dates being unknown, the Defendant,

ANGEL LUIS CLAUDIO

knowingly and willfully did combine, conspire, confederate and agree with others known and unknown, to violate Title 18, United States Code, Section 1347, that is, to execute a scheme to defraud a health care benefit program affecting commerce, as defined by Title 18, United States Code, Section 24(b), that is, Medicare and Medicaid, and to obtain, by means of false and fraudulent pretenses, representations and promises, money and property owned by, and under the custody and control of, said health care benefit programs, in connection with the delivery of and payment for health care benefits, items and services.

OBJECT OF THE CONSPIRACY

9. The object and purpose of the conspiracy and scheme was for the Defendant ANGEL LUIS CLAUDIO and others to unlawfully enrich themselves by falsifying the identity of the rendering physician in claims that were submitted to Medicare and Medicaid.

MANNER AND MEANS OF THE CONSPIRACY

10. The manner and means by which the Defendant and his co-conspirators sought to accomplish the object of the conspiracy included, but were not limited to, the following:

- a. It was a part of the conspiracy that in or around January 2017 the Defendant, who was under court order not to obtain employment that involved the billing of Medicare and Medicaid, obtained employment at a medical clinic in Mission, Texas (the "Mission Clinic").
- b. It was further a part of the conspiracy that beginning in or around January 2017 and continuing through in or around March 2018, the Defendant treated Medicare and Medicaid beneficiaries at the Mission Clinic.
- c. It was further a part of the conspiracy that the Defendant and his co-conspirators falsely and fraudulently used the identity of a different physician to submit claims to Medicare or Medicaid for services rendered by the Defendant.
- d. It was further a part of the conspiracy that the Defendant and his co-conspirators submitted, or caused others to submit, claims to Medicare and Medicaid that concealed the fact that the Defendant was the rendering physician.
- e. It was further a part of the conspiracy that the Defendant and his co-conspirators created, or caused others to create, electronic medical records that falsely and fraudulently misidentified the rendering physician.

- f. It was further a part of the conspiracy that the Defendant and his co-conspirators caused Medicare and Medicaid to pay claims based on submissions that falsely and fraudulently misidentified the rendering physician.

All in violation of Title 18, United States Code, Sections 1349.


NOTICE OF CRIMINAL FORFEITURE
(18 U.S.C. § 982(a)(7))

Pursuant to Title 18, United States Code, Section 982(a)(7), the United States gives notice that upon Defendant's conviction of conspiracy to commit health care fraud charged in this Information, the United States intends to seek forfeiture of all property, real or personal, which constitutes or is derived from proceeds traceable to such offenses.

MONEY JUDGMENT AND SUBSTITUTE ASSETS

The United States gives notice that it will seek a money judgment against the Defendant. In the event that one or more conditions listed in Title 21, United States Code, Section 853(p) exist, the United States will seek to forfeit any other property of the Defendant up to the amount of the money judgment

RYAN K. PATRICK
UNITED STATES ATTORNEY



ANDREW R. SWARTZ
ASSISTANT UNITED STATES ATTORNEY



MARIAN SWANBERG
SPECIAL ASSISTANT UNITED STATES ATTORNEY